Name: Full

Certificate of Death

Herman Adams

Town — County —

Died at P. E. Co. MARYLAND

Date 189 9 Month May Day 13 | Age Y. 1 M. - D. 2 | Native of | Occupation

Male / Female | White / Colored | Married / Single | Widow / Widower | Divorced | Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death { Primary Pneumonia 72 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Herm Tilstead (Undertaker)

Address Laurel Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65900

Attended by
Dr Eaton. 6-19
Jeffersonville, Ind.

Period that he did
some such business.

Name In Full

Certificate of Death

Peter A. Pedigo

Town

County

Died at Laurel Pr. Geo. MARYLAND

Date 189 9 Month 2 Day

Age Y. M. D.

Native of

Occupation

Male White Married Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of

Wife

Father's Name

Mother's Name

Cause of Death — Primary: Pneumonia 72 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Wm. Dulin & Wendelstadt

Address Laurel Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70999

Name In Full

Certificate of Death

Atilia Ambrus

Town

County

Died at [illegible] P.G.

MARYLAND

Date 189	Month Day	Age Y. M. D.	Native of MD	Occupation [illegible]
	17 11 mo	37		housewife

Male / Female — White / Colored — Married / Single — Widow / Widower — Divorced — Number of children living

Husband of / Wife: Samuel Gerhardi

Father's Name: Adolph Ambrus

Mother's Name: Margaret Fritz

Cause of Death — Primary: Kidney Disease 139 — How long sick: 2 or 3 years

Immediate: Tuberculosis 17 OVER

Accident, Suicide, Homicide

Reported by: F. Gaeth

Address: Baltimore Blvd [redacted] Pocomoke MD OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. [illegible]

of [illegible]

Seen by Coroner.....

of.....

Information contained in this certificate was received from [illegible]

of [illegible]

Name In Full Daisy Gertrude Beall — Certificate of Death

Died at Town Frostburg County Alg. Ges. MARYLAND

Date 189 9 Month 5 Day 2 | Age Y. 18 M. D. | Netive of | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of Wife

Father's Name Joseph L. Beall | Mother's Name Henrietta Beall

Cause of Death: Primary — How long sick

Immediate 161 — Accident, Suicide, Homicide

Reported by Dr. Geo. Enquirer

Address

Must be signed by physician, if any in attendance, otherwise by coroner, underteker or minister.

LIBRARY BUREAU, 7588R

Name in Full

Certificate of Death

Morgan Davis Bolden

Town

Died at Brandywine County Prince Georges MARYLAND

Month Day

Data 189 9 May 8 Age Y. 45 M. D. Native of Md Occupation —

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower Divorced Number of children living

Husband of Wife

Father's Name Morgan Bolden Mother's Name Annie Bolden

Cause of Death { Primary Chronic Dysentery How long sick 2 days

Immediate " 12

Accident Suicide ~~Homicide~~

Reported by C. A. Hall

Address Brandywine Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65662

Name In Full

Certificate of Death

Maggie E Cunningham

Died at Town: Bellevue County: Prince Georges MARYLAND

Date 1899 Month: May Day: 7" | Age Y.: 29 M.: 2 D.: 20 | Native of: Md | Occupation: Housewife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 4

~~Husband~~ Wife of William Cunningham

Father's Name: Frank Hart

Mother's Name: May Hart

Cause of Death: Primary: Consumption 220

Immediate:

How long sick: about 2 years

~~Accident~~ ~~Suicide~~ ~~Homicide~~

Reported by C A. Fox

Address Bellevue Prince Geo Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65061

Name in Full

Certificate of Death

Benjamin Dackett

Died at Town Nottingham County Pr Geo Co MARYLAND

Date 1899 Month May Day 24 Age Y. 17 M. D. Native of Md Occupation Farm Hand

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~ Wife of

Father's Name Fred Dackett Mother's Name Martha Ann Dackett

Cause of Death: Primary

Immediate Peritonitis 93

How long sick

Accident, Suicide, Homicide

Reported by O. H. Gibbons M.D.

Address Croom md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. [illegible]

Name in Full

Certificate of Death

Mollie S. Fluhart

Died at Town Laurel County P. G. MARYLAND

Date 1899 Month May Day 4 Y. 16 M. D. Native of Md Occupation S. Girl

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

22a

Father's Name John C. Fluhart Mother's Name Mary Fluhart

Cause of Death { Primary Pulmonary Tuberculosis How long sick 9 mo

Immediate Prostration Accident, Suicide, Homicide

Reported by J R Fluhart

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 63868

Name In Full

Certificate of Death

Agnes R. Harvey

Town

County

Died at

Pr. Geo.

MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
5	7	23				

Date 189 9

Age

~~Male~~ / Female

White / ~~Colored~~

Married / Single

Widow / Widower

Divorced

Number of children living

~~Husband~~ / Wife of Francis K Harvey

Father's Name

Mother's Name

Cause of Death — Primary: 161

How long sick

Immediate

Accident, Suicide, Homicide

Reported by Pr. Geo. Enquirer

Address 5-12

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Name In Full Kernan Bernard Kernan

Certificate of Death

Died at Town Farm of his Mother near Branchville County P. Geo. Co. MARYLAND

Date 189 Month May Day 3 | Age Y. 24 M. D. | Native of America | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | Widow ~~Widower~~ | Divorced ~~Number of children~~ living

Husband of
Wife

Father's Name James P. Kernan died 2 years ago. | Mother's Name Mrs James P. Kernan

Cause of Death — Primary: Consumption | How long sick: 3 years or longer

Immediate: 22a

Accident, Suicide, Homicide

Reported by F. Gasch

Address Bladensburg Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70858

Attended by Dr. Peterson moved from Hyatts
ville to Baltimore on the same day the
of young man died
could not get any Information
from him as I dont Know his Adress

Seen by Coroner

of Dr Fox been attending to deceased for years
but I understand that he said that he could
not doe any thing for him, what I
can say is Consumption turning to Dropsy

Information contained in this certificate
ceived from

of

Name in Full King

Certificate of Death

Died at Town Luxedo County Prince Georges MARYLAND

Date 189 9 Month 5 Day 2 | Age Y. — M. 3 D. 22 | Native of Washington DC | Occupation —

Male / ~~Female~~ | White / ~~Colored~~ | ~~Married~~ / ~~Single~~ | ~~Widow~~ / Widower | ~~Divorced~~ / ~~Number of children living~~

~~Husband~~ / ~~Wife~~ of

~~Father's~~ Name Jakes

Name of Husband Ida L. King Mother's Name Margaret S King

Cause of Death { Primary Hydrocephalus ✓ 5-2 How long sick Since birth

Immediate

~~Accident, Suicide, Homicide~~

Reported by Chas Allen MD

Address Hyattsville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name In Full

Rebecca Lancaster

Certificate of Death

Died at Town: Bellevue County: Prince Geo MARYLAND

Date 189- Month: May Day: 20 | Age Y.: 45 M.: - D.: - | Native of: Md | Occupation: Housewife

~~Male~~ Female | ~~White~~ Colored | Married | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 4

~~Husband~~ Wife of Eason Lancaster

Father's Name: Joseph Hanis Mother's Name: Priscilla Hanis

Cause of Death — Primary: Heart disease 5-7 — How long sick: 2 years

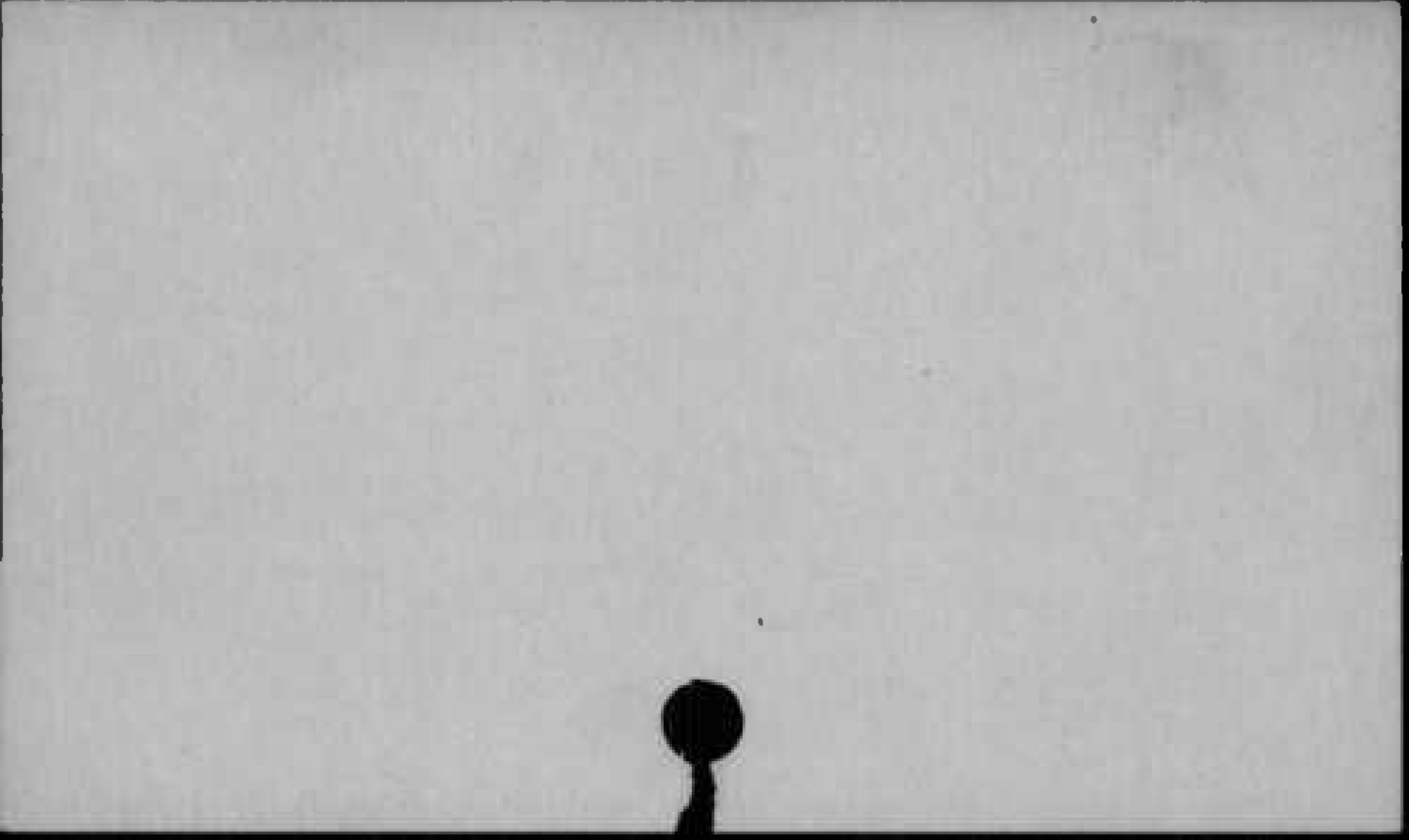
Immediate: Don't know the imm — Accident, Suicide, Homicide:

Reported by: diane eason - only saw her

Address: the morning of - has been to the undertaker Kemp Bros C.A. Forrester

Must be signed by physician, if any in attendance, otherwise coroner, undertaker or minister.

LIBRARY BUREAU, B6060



Name in Full — Certificate of Death

Anna Owens

Died at — Town: Laurel — County: Prince Georges Co — MARYLAND

Date 1899 — Month: May - 16 — Day — Age: Y. 83. M. 11. D. — Native of: Maryland — Occupation: Housekeeper

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / ~~Single~~ / Widow / ~~Widower~~ — ~~Divorced~~ — Number of children living: Eight-

~~Husband~~ / Wife of Samuel Owens

Father's Name — Mother's Neme: Meeks

Cause of Death — Primary: Purpura Hamorrhagica (Senilo) — How long sick: 3 weeks

Immediete: Paralysis — 141

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by John Cronmiller 1645

Address Laurel Md

Must be signed by physician, if eny in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Thos. E. Phair

Certificate of Death

Died at Town: Laurel County: Prince Geo's Co. MARYLAND

Date 1899 Month: May Day: 1

Age Y. 47 M. 2 D. 27

Native of Montgomery Co. Md.

Occupation R. R. Contractor

~~Male~~ / ~~Female~~ ~~White~~ / ~~Colored~~ Married / ~~Single~~ ~~Widow~~ / Widower ~~Divorced~~

Number of children living One

Husband / ~~Wife~~ of Anna E. Phair

Father's Name Wm. H. Phair

Mother's Name Leah. ~~Ford~~ Bass

Cause of Death — Primary: Tuberculosis 2d

Immediate: Exhaustion

How long sick 6 months

~~Accident, Suicide, Homicide~~

Reported by W. T. Taylor M.D.

Address Laurel Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898